



Division 05

Emergency Medical

Chapter 13– Paramedic/Physician On-Scene Interaction

February 2009

POLICY

This General Order provides guidelines for the interaction of physicians and emergency medical services providers on an incident scene. These guidelines are not intended to take place of mutual recognition of education/training, professional respect and courtesy, or two-way communication between persons presumed to be acting in the best interest of the patient.

This guideline serves to supplement the guidance provided in the Maryland Medical Protocols for Prehospital Emergency Medical Services Providers (Protocol).

DEFINITIONS

N/A

PROCEDURES

1. On Scene

The following addresses physician identification, medical control, conflict resolution, and extraordinary care orders when a physician is on scene.

A physician on the scene may function as control physician, provided the following conditions are met:

- Identity as a physician is established.
 - For incidents occurring in a doctor's office, or in a patient's home when the family identifies the physician,

the identity as a physician is assumed.

- For other locations, any person representing themselves as a physician must produce picture and medical identification (e.g. Maryland Board of Medical Examiners, the State Medical Board, Military Medical, or Hospital Staff).

- EMS Providers are directed to perform appropriate care as described in the Maryland Medical Protocols for Prehospital Emergency Medical Services providers.
- The on-scene physician is to contact a hospital control physician as soon as practical but, in any event, prior to the transport unit's departure from the scene. The on-scene physician will not have to accompany the patient, unless her/she has performed an act (skill) that exceeds the provider's level of training to maintain. In this case, the physician may be released from accompanying the patient by the hospital control physician.

In circumstances that require conflict resolution (e.g. failed proof of identity or orders that exceed provider's level of training):

- Establish contact with an approved base station hospital and establish contact with the physician. Summarize the preceding events, orders, and discuss appropriate care within the scope of the Protocol.



- If the control physician and the on-scene physician cannot resolve the conflict, the orders of the control physician shall supersede the orders of the on scene physician.
- Should the physicians be in agreement, the order will be complied with, unless it is unlawful.

Paramedics involved in an incident where extraordinary care was ordered, regardless of whether or not it was rendered, will immediately advise the AEMS Shift Commander and file a Medical Incident Report.

Physicians Orders for Extraordinary Care

The Protocol clearly identifies the physician’s and paramedic’s responsibility regarding delivery treatments and procedures regarded as extraordinary care.

An on scene physician may order extraordinary care as long as the following conditions regarding medical control are met:

- The on scene physician agrees to accompany the patient to the hospital.
- The on scene physician must establish direct contact with a physician at the approved base station facility and receiving facility. The physician at the base station facility must accept responsibility for the extraordinary care orders. In this case, the on-scene physician will not be required to accompany the patient to the hospital.
- If the physician at the Medical Control facility refuses to accept responsibility for the extraordinary care, the on-scene physician must accompany the patient to the hospital.

The paramedic is responsible for advising the on-scene physician of their responsibilities regarding the immediate notification of the State EMS Director and written documentation requirements, and review by the Maryland State Board of Physicians Quality Assurance. Refer to Section 1.7.2 and 1.8 of the Protocol for specifics.

REFERENCES

N/A

FORMS/ATTACHMENTS

N/A